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SERIAL NUMBER	FILING OR 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/457,201	12/06/1999	604	3763	CB-07-1
<b>APPLICANTS</b> TERRY S. DAVISON, SAN FRANCISCO, CA; JEAN WOLOSZKO, MOUNTAIN VIEW, CA; MICHAEL A. BAKER, WOODSIDE, CA; HIRA V. THAPLIYAL, LOS ALTOS, CA; PHILIP E. EGGERS, DUBLIN, OH;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/248,763 02/12/1999 PAT 6,149,620 and claims benefit of 60/096,150 08/11/1998 and claims benefit of 60/098,122 08/27/1998 which is a CIP of 08/795,686 02/05/1997 PAT 5,871,469 which is a CIP of 08/990,374 12/15/1997 PAT 6,109,268				
<b>** FOREIGN APPLICATIONS *****</b> <i>None</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 01/11/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY CA	SHEETS DRAWING 31	TOTAL CLAIMS 36
Verified and Acknowledged Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 7		
<b>ADDRESS</b> 21394				
<b>TITLE</b> SYSTEMS AND METHODS FOR ELECTROSURGICAL TISSUE TREATMENT				
<b>FILING FEE RECEIVED</b> 1360	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	